## Facilitated IEP Program Instructions for Requesting a Facilitated IEP Meeting

- 1. Fill out the information that pertains to you and sign the form.
- Send the form to the other party to be completed and signed or submit it directly to the South Carolina Department of Education (SCDE), Office of Special Education Services (OSES). The OSES facilitation coordinator will contact the other party to see if they are willing to work with a facilitator to develop an acceptable IEP.
- 3. If parties fill out this form at the same time, the school district/agency will forward the form to the OSES.
- 4. Once the request form is signed by the parents and the school staff, the school district/agency schedules an IEP meeting at a mutually agreeable time and place, and faxes the notice of the meeting and the current IEP to the OSES. The notice will include the date, time, place and address of the meeting. The OSES requires that parties requesting a facilitator do so at least 10 working days before the scheduled date of the IEP meeting to give the OSES facilitation coordinator time to confirm that both parties agree to use facilitation; locate an available facilitator; and gather and share relevant information. The OSES facilitation coordinator will make every attempt to locate a facilitator who is available during the time frame chosen by the IEP team. If no facilitator is available on this date, the IEP team may need to reschedule the meeting or proceed without the facilitator. Please note that a facilitated IEP meeting will not be scheduled if the facilitation coordinator determines that the issues identified by the parties are not related to the student's IEP or otherwise determines that facilitation is not an appropriate resolution option. In such cases, the facilitation coordinator will work with the parties to identify other resolution options.
- 5. For additional information, contact the OSES at 803-734-8224, or fax: 803-734-5021.

South Carolina Department of Education
Office of Special Education Services
1429 Senate Street
Room 808
Columbia, South Carolina 29201

## Facilitated IEP Project Request for Facilitated IEP Meeting

- We request assistance in facilitating an IEP meeting.
- We know that using a facilitator is voluntary and cannot be used to delay or deny the parent or adult student's right to a due process hearing.
- Our goal is to write an acceptable IEP that focuses on the needs of the child.
- We understand that the facilitation will occur only if the minimally required team members are present.
- We agree not to call the facilitator to testify in any subsequent proceedings.
- The South Carolina Department of Education, Office of Special Education Services, provides a facilitator at no cost to the participants, to assist schools and parents in reaching consensus on an IEP.

## **Please Print**

Student's Name		School District/Agency	,	
Disability		Special Education Direct	ctor's Name	
DOB (optional) Age	Grade	Address		
Parent/ Guardian Name(s)		City	State	Zip
Address		Phone ( )		
City State	Zip	Fax ( )		
•	•			
Home         ( )           Work         ( )		Email		
Fax ( )				
Cell ( )		Special Education Direc	ctor's Signature	Date
Email				
Parent/Adult Student's Signature	Date			
Our last IEP team meeting was on (date)		We have concerns about the	following areas of the	IEP:
identification, evaluation present levels of education performance goals and objectives services	related	nent modations/modifications services re technology	progress re transition discipline/t implement	ehavior

other	
Briefly describe why a facilitator is n	eeded for this meeting.
scheduling a Facilitated IEP Meeting. V meeting may exceed three (3) hours. To ending time, unless excused in wr districts/agencies must follow federal a	should prepare for a minimum of three (3) hours when When there are a number of concerns/issues to discuss the eam members should be willing to stay until the agreed upon iting by the school district/agency and parent. School and state regulations regarding excusals. If it appears that discuss concerns/issues, the facilitation meeting may extend rs in agreement.
Accessibility needs for the meeting (	of the parent or student with a disability).
Translation Needs (Please specify):	
Interpreter Needs (Please specify):	
Accessibility Needs (Please specify):	
Please describe the expected outcon	ne of using a facilitator.
Authoriza	ation to Release Educational Data
If the party requesting facilita student with a disability, plea	ation is the parent, guardian, surrogate parent, or adult se sign the following release.
District/Agency contractors to share the IEI identity, needs, and issu	n a facilitated IEP meeting, I am authorizing School and its employees, agents and P and other relevant information about the student's surrounding disagreements about educational facilitation coordinator and assigned facilitator.
 Signature	 Date
Signature	Date

A facilitated IEP meeting will not be scheduled until the OSES receives this signed authorization and the consent of both parties to proceed with facilitation.